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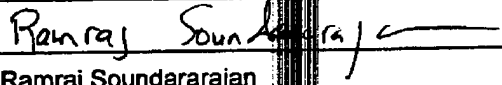
(to be used for all correspondence after initial filing)

Application Number	10/029,928
Filing Date	12/31/2001
First Named Inventor	Doherty, James M.
Art Unit	2152
Examiner Name	Lesniewski, Victor D.
Attorney Docket Number	T00362
Total Number of Pages in This Submission	8

ENCLOSURES (Check all that apply)


<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input type="checkbox"/> Extension of Time <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawings <input type="checkbox"/> License-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): [X] Pre-Appeal Brief Request for Review form in one (1) page [X] Reasons to Support Pre-Appeal Brief Request for Review in four (4) pages
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Lacasse & Associates, LLC		
Signature			
Printed Name	Ramraj Soundararajan		
Date	December 16, 2005	Reg. No.	53,832

CERTIFICATE OF TRANSMISSION/MAILING

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Typed or printed name	Amanda Cogar	Date	December 16, 2005

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